Comment on 'Who has a repeat abortion? Identifying women at risk of repeated terminations of pregnancy: analysis of routinely collected health care data'

Whilst we have no criticism of the methodology and presentation of findings of the study by McCall *et al.*, we were disappointed by the use of the phrases 'repeat abortion' and 'repeat termination'. This kind of terminology has been queried before as not appropriate and stigmatising.^{2 3}

The term carries connotations of 'repeat offender' and an implicit assumption that women should have 'learnt their lesson'. We believe that the term accentuates abortion stigma more generally: that having one abortion is bad enough, more than one is unacceptable. In addition, the use of the term possibly suggests that women requesting abortion should somehow be judged by health care providers as to whether one is more deserving than another of the procedure.

Evidence is accumulating that stigma is not necessarily overt but may be more subtle; indeed stigma can be perpetuated inadvertently by those who do not think carefully enough. The term 'repeat abortion' may introduce or reinforce stigma both for women requesting abortion and for abortion service providers.

Some colleagues ask what term would you recommend using instead. We suggest 'more than one abortion' and 'subsequent abortions', although we agree that these do not slip off the tongue so easily – maybe that is a good thing so that we have to think a little more before labelling women according to the number of abortions they have had.

We hope that the authors of this study, researchers and journal editors will consider carefully the terms they use to discuss abortion to ensure they do not contribute to the negativity and stigma that surrounds abortion and the women who choose to end an unplanned pregnancy.

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REFERENCES

- McCall SJ, Flett G, Okpo E, et al. Who has a repeat abortion? Identifying women at risk of repeated terminations of pregnancy: analysis of routinely collected health care data. J Fam Plann Reprod Health Care 2016;42:133–42.
- Weitz TA, Kimport K. A need to expand our thinking about "repeat" abortions. Contraception 2012;85:408–412.
- 3 Gold J, Hurley L, Wachsmann H, et al. How to talk about abortion: a guide to rights-based messaging. London: IPPF, 2015. http://www. ippf.org/sites/default/files/ippf_abortion_ messaging_guide_web.pdf [accessed 19 January 2016].
- 4 Hoggart L, Newton VL, Bury L. "How could this happen to me?" Young women's experiences of unintended pregnancies: a qualitative study. Milton Keynes: OUP, 2015. http://www.open.ac.uk/health-and-social-care/main/files/hsc-pa/file/ecms/web-content/research-web-content/MSI_quali-report_10-15_final_email.pdf [accessed 19 January 2016].
- 5 Kumar A, Hessini L, Mitchell EMH. Conceptualising abortion stigma. Cult Health Sex 2009;11:625–639.
- 6 Rowlands S, Cleland K, Trussell J. More than one abortion. In: Rowlands S (ed.), *Abortion Care*. Cambridge, UK: Cambridge University Press, 2014:193–200.

